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FEB 28 2006

PTO/SB/21 (09-04)

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FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/719,676
Filing Date	11/21/2003
First Named Inventor	David WIEBE
Art Unit	2863
Examiner Name	LAU, TUNG S.
Attorney Docket Number	

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <u>Change of Correspondence Address</u> <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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Typed or printed name	M. D. POWELL
Date	Feb 28, 2006

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PTO/SB/122 (01-06)

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Application Number	101719,676
Filing Date	11/21/2003
First Named Inventor	DAVID WIEBE
Art Unit	2863
Examiner Name	LAU, TONG S.
Attorney Docket Number	1107.002

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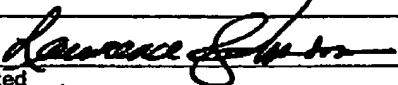
<input type="checkbox"/> Firm or Individual Name	DAVID WIEBE				
Address	RADAR HVAC REFRIGERATION INC. 562 C DAVID ST				
City	Victoria	State	BC	Zip	V8T 2C8
Country	CANADA				
Telephone	250-475-0706	Email	DAVE@RADARHVAC.COM		

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 Attorney or agent of record. Registration Number _____
 Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

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Name

LAWRENCE JOHNSON

Date

FEBRUARY 13, 2006

Telephone (604) 543 6272

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PTO/SB/122 (04-05)

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P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	10/719,676
Filing Date	11/21/2003
First Named Inventor	David WIEBE
Art Unit	2863
Examiner Name	Lau, Tung S.
Attorney Docket Number	1107. 002

Please change the Correspondence Address for the above-identified patent application to:

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 Firm or
Individual Name: DAVID WIEBEAddress: RADAR HVAC REFRIGERATION INC.
562 C DAVID ST.

City: VICTORIA State: BC Zip: V8T 2C8

Country: CANADA

Telephone: 250-475-0706 Email: DAVE@RADARHVAC.COM

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 Attorney or agent of record. Registration Number _____
 Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Signature: 

Typed or Printed Name: DAVID WIEBE

Date: FEB 9, 2006 Telephone: 250-475-0706

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Application Number	10/719,676
Filing Date	11/21/2003
First Named Inventor	DAVID WIEBE
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Firm or
Individual Name **DAVID WIEBE**

Address **RADAR HVAC REFRIGERATION INC.**
562 C DAVID ST

City **VICTORIA** State **BC** Zip **V8T 2C8**

Country **CANADA**

Telephone **250-475-0706** Email **DAVE@RADARHVAC.COM**

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Signature

PHILLIP SMITH

Date **FEB 23, 2006** Telephone **250-220-1280**

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